

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>DM</i>	<i>32</i>	<i>1/1</i>
FORMALITY REVIEW	<i>H2</i>	<i>30-916</i>	<i>03-06-01</i>
RESPONSE FORMALITY REVIEW	<i>104</i>	<i>104</i>	<i>10/14</i>

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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